

REGISTRATION FORM 2009



STUDENT INFORMATION												
Name (as in passport):	Nationality:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female										
Date of Birth (dd-mm-yyyy):	Home Phone:											
Email address:	Mobile Phone:											
Mailing address:												
Level of Mandarin: <input type="checkbox"/> Zero/Basic <input type="checkbox"/> Beginner <input type="checkbox"/> Lower Intermediate <input type="checkbox"/> Upper Intermediate <input type="checkbox"/> Advance												
PROGRAM DATA												
City I want to study in: <input type="checkbox"/> Shanghai <input type="checkbox"/> Beijing <input type="checkbox"/> Nanjing												
Program I want to apply for: <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> M+ Summer Program</td> <td><input type="checkbox"/> M+ Forties Up</td> </tr> <tr> <td><input type="checkbox"/> M+ Premium Course</td> <td><input type="checkbox"/> M+ Master Course</td> </tr> <tr> <td><input type="checkbox"/> M+ Academic Course</td> <td><input type="checkbox"/> M+ Teacher Training</td> </tr> <tr> <td></td> <td><input type="checkbox"/> M+ Business Course</td> </tr> <tr> <td></td> <td><input type="checkbox"/> M+ Private Course</td> </tr> </table>			<input type="checkbox"/> M+ Summer Program	<input type="checkbox"/> M+ Forties Up	<input type="checkbox"/> M+ Premium Course	<input type="checkbox"/> M+ Master Course	<input type="checkbox"/> M+ Academic Course	<input type="checkbox"/> M+ Teacher Training		<input type="checkbox"/> M+ Business Course		<input type="checkbox"/> M+ Private Course
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	<input type="checkbox"/> M+ Business Course											
	<input type="checkbox"/> M+ Private Course											
Starting time (dd-mm-yyyy):	Finishing time (dd-mm-yyyy):	Number of weeks:										
Apply for Financial Support Option*: <input type="checkbox"/> No <input type="checkbox"/> Yes *Temporarily available for 4-week and 8-week Premium Course Do you still want to apply for the course if Financial Support is not available? <input type="checkbox"/> No <input type="checkbox"/> Yes												
SERVICE DATA												
Accommodation Arrangement: <input type="checkbox"/> No <input type="checkbox"/> Yes												
If yes, please select your preferred accommodation:												
<input type="checkbox"/> Single Room Shared Apartment	<input type="checkbox"/> University Dormitory	<input type="checkbox"/> Home stay										
<input type="checkbox"/> Serviced Apartment	<input type="checkbox"/> Studio	<input type="checkbox"/> Hotel										
Airport Picking Up: <input type="checkbox"/> No <input type="checkbox"/> Yes, please arrange an airport pickup for me.												
PAYMENT												
<input type="checkbox"/> Bank Transfer	<input type="checkbox"/> PayPal	<input type="checkbox"/> Credit Card										
REMARKS												